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ATTN: Examiner Dalzid Singh
Art Unit: 2613
Fax: 571-273-8300

Regarding Application # 10/087,022

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PTO/SB/21 (09-06)

Approved for use through 03/31/2007. OMB 0851-0031
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/087,022
	Filing Date	2-28-2002
	First Named Inventor	Shpanzer
	Art Unit	2613
	Examiner Name	Singh, Dalzid
Total Number of Pages in This Submission	Attorney Docket Number	

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Celight, Inc.		
Signature	<i>[Signature]</i>		
Printed name	Nadya Reingand		
Date	10-3-2006	Reg. No.	

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INDICATION FORM

Application Number	10/087,022
Filing Date	2-28-2002
First Named Inventor	Shpanter
Title	
Art Unit	2613
Examiner Name	Singh, Daljit
Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.

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<input checked="" type="checkbox"/> Firm or Individual Name	Nadya Reingand		
Address	Celight, Inc. 12200 Teek Rd		
City	Silver Spring	State	MD
Country		Zip	20904
Telephone	301-6257000	Email	nreingand@celight.com

I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/86)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Nadya Reingand</i>	Date	10-3-2006
Name	Nadya Reingand	Telephone	443-4747797
Title and Company	IP Director, Celight Inc		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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